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brospinal meningitis, epidemic or septic sore throat, paratyphoid fever, scarlet fever, smallpox, or typhoid fever exists on any farm or dairy producing milk, cream, butter, or other dairy products for sale, it shall be the duty of the physician in attendance to report immediately to the local health officer the existence on such farm or dairy of such case.

It shall be the duty of the health officer to report immediately to the State commissioner of health by telephone or telegram the existence on such farm or dairy of such case, together with all facts as to the isolation of such case, and giving the names of the localities to which such dairy products are delivered.

This regulation shall take effect throughout the State of New York, except in the city of New York, on the 1st day of January, 1916.

**REG. 36. Minimum period of isolation.**—The minimum period of isolation, within the meaning of this code, shall be as follows:

Chicken-pox, until 12 days after the appearance of the eruption and until the crusts have fallen and the scars are completely healed.

Diphtheria (membranous croup), until two successive negative cultures have been obtained from the nose and throat at intervals of 24 hours.

Measles, until seven days after the appearance of the rash and until all discharges from the nose, ears and throat have disappeared and until the cough has ceased.

Mumps, until two weeks after the appearance of the disease and one week after the disappearance of the swelling.

Scarlet fever, until 30 days after the development of the disease and until all discharges from the nose, ears and throat, or suppurating glands, have ceased.

Smallpox, until 14 days after the development of the disease and until scabs have all separated and the scars completely healed.

Whooping cough, until eight weeks after the development of the disease or until one week after the last characteristic cough.

This regulation shall take effect throughout the State of New York, except in the city of New York, on the 1st day of January, 1916.

**Tuberculosis—Duties of Health Officer when Notified of a New Case. (Chap. 2, Reg. Public Health Council, Dec. 7, 1915.)**

The public health council has amended chapter 2 of the sanitary code by adding a new regulation, to be numbered 42a, after regulation 42 in said chapter, as follows:

**REG. 42a. Duties of health officer on receiving report of apparent case of tuberculosis.**—Upon receiving a report in writing of an apparent case of tuberculosis, as authorized by section 320 of the public health law, the health officer shall thereupon take the following steps:

1. If the alleged case has been previously reported to him by a physician as having tuberculosis and the latter has elected to assume the sanitary supervision thereof as permitted in section 328 of the public health law, the health officer shall ascertain promptly whether such physician is maintaining proper sanitary supervision.

2. If the alleged case has not been previously reported to him as having tuberculosis, the health officer shall take proper measures to determine whether there is reason to believe such person is affected with pulmonary tuberculosis, and, if by suitable physical or sputum examination, or both, he ascertains that the person is affected with pulmonary tuberculosis, he shall then proceed in accordance with the provisions of the public health law and the rules of the State department of health.

This regulation shall take effect throughout the State of New York, except in the city of New York, on the 1st day of March, 1916.